

ORIGINAL

BEFORE THE DIVISION OF MEDICAL QUALITY
OF THE BOARD OF MEDICAL QUALITY ASSURANCE
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation)	No. D-1754
Against:)	
)	L-11621
FRANK KREITLER, M.D.)	
2041 Belshaw)	
Mojave, California)	
)	
License No. C-24435)	
)	
Respondent.)	
)	

DECISION AND ORDER

The attached proposed decision was ordered not adopted by this Division on December 2, 1976. After this Division's reading of the transcript, consideration of the evidence and arguments, the following decision and order is made.

The attached decision by Administrative Law Judge William Green, and dated September 21, 1976, and in reference to the above captioned respondent, is hereby adopted by the Division of Medical Quality as its Decision and Order, the same being incorporated herein by reference as if set forth at length herein, with said decision being adopted in its entirety except for the following modifications:

The imposition of penalty is struck and the following substituted:

The license to practice medicine and surgery in the State of California heretofore issued to respondent is hereby revoked; provided, however, execution of this order of revocation shall be stayed and respondent shall be placed on probation for a period of five (5) years from and after the effective date of this decision upon the following terms and conditions:

(1) Respondent shall not during the first 180 days immediately following the effective date of this decision, exercise any of the rights and privileges granted to him by his license to practice medicine and surgery, provided however, that respondent may before the effective date of this decision or within the period of the 180 day suspension provided herein submit a proposed program to this Division of unpaid community medical service of at least 20 hours per week for 9 weeks and at least 4 hours per week for an additional 2 years and after this Division's written approval of such program respondent may resume the full practice of medicine, provided further that respondent shall make and keep complete and accurate records of such community service if such be elected.

(2) Respondent shall comply with all laws of the United States, State of California and its political subdivisions and at resumption of practice, the rules and regulations of the Board of Medical Quality Assurance.

(3) Respondent shall initiate and file with the Division of Medical Quality at its office in Sacramento,

California, at quarterly intervals after the effective date of this order, an affidavit setting forth the respondent's then present residence and office addresses, and shall set forth, if such be the case, that respondent has fully and faithfully complied with all of the terms and conditions of probation herein imposed; if respondent has failed to comply with any of the terms and conditions of probation, or has committed any acts in violation of this order, the same shall be fully set forth and explained in said affidavit. Failure to file this affidavit or to include therein the information above specified shall constitute a violation of the terms of probation.

(4) Respondent shall annually report in person to the Division of Medical Quality at such times and places as specified and for each year thereafter during said period of probation. It shall be the responsibility of respondent to request of said Division the appropriate times and places.

(5) Respondent shall fully and completely comply with Probation Surveillance Program and cooperate with any agent of the Board operating thereunder, including the making available for inspection respondent's records of community medical service if such service be elected hereunder.


Should the Division of Medical Quality, after notice to respondent and an opportunity to be heard, determine that respondent has during period of probation violated any term or condition herein imposed, said Division may

reimpose the revocation or make such other or further order as it may then deem just and reasonable in the exercise of its discretion. Proceedings to reimpose the revocation or make other disciplinary order with respect thereto shall be initiated within the period of probation or within one year after the termination thereof; otherwise the stay shall become permanent.

This Decision shall become effective on the 14th day of AUGUST, 1977.

IT IS SO ORDERED this 16th day of AUGUST, 1977.

DIVISION OF MEDICAL QUALITY
BOARD OF MEDICAL QUALITY ASSURANCE
DEPARTMENT OF CONSUMER AFFAIRS
OF THE STATE OF CALIFORNIA

By 
Blanche C. Bersch, Esq.
Secretary-Treasurer
Division of Medical Quality

BEFORE THE DIVISION OF MEDICAL QUALITY
BOARD OF MEDICAL QUALITY ASSURANCE
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation)	No. D-1754
Against:)	
FRANK KREITLER, M.D.)	L-11621
2041 Belshaw)	
Mojave, California)	
License No. C-24435)	
Respondent.)	

NOTICE OF NON-ADOPTION OF PROPOSED DECISION

(Pursuant to Section 11517 of the Government Code)

TO THE RESPONDENT ABOVE NAMED:

YOU ARE HEREBY NOTIFIED THAT the Division of Medical Quality of the Board of Medical Quality Assurance of the State of California has decided not to adopt the attached proposed decision, filed herein by the duly assigned Administrative Law Judge, William Green, and dated, September 21, 1976. You are also notified that the Division of Medical Quality will decide the case upon the record, including the transcript and without the taking of additional evidence. You are hereby afforded the opportunity to present written argument to the Division of Medical Quality if you desire to do so, by filing such written argument with the Division at its office at 1430 Howe Avenue, Sacramento, California, 95825, and the same opportunity is afforded the Attorney General of the State of California.

You will be notified of the date for submission of such written arguments when the transcript of the administrative hearing becomes available.

DATED: December 2, 1976

DIVISION OF MEDICAL QUALITY
BOARD OF MEDICAL QUALITY ASSURANCE


WILLIAM E. WHEELER
Assistant Executive Secretary

BEFORE THE
BOARD OF MEDICAL QUALITY ASSURANCE
DIVISION OF MEDICAL QUALITY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation	}	NO. D-1754
Against:		L-11621
FRANK KREITLER, M.D.		
2041 Belshaw		
Mojave, California		
License No. C-24435	}	
Respondent.		

PROPOSED DECISION

This matter came on regularly for hearing before William Green, an Administrative Law Judge of the Office of Administrative Hearings, at Santa Ana, California, on August 24, 1976, at the hour of 10:30 a.m. Joel S. Primes, Deputy Attorney General, appeared on behalf of the complainant. Respondent was present in person and was represented by Erwin J. Keup, Attorney at Law. This matter was heard on a joint record with Department of Health, Case No. 76-39, L-11622, entitled "In the Matter of the Accusation of Frank Kreidler, M.D.". Oral and documentary evidence was introduced. The following facts are found:

I

Raymond Reid made the Accusation herein in his official capacity as the Executive Secretary of the Board of Medical Quality Assurance, Division of Medical Quality, State of California.

II

On September 17, 1962 respondent was issued physician's and surgeon's certificate No. C-24435 by the predecessor of the Board of Medical Quality Assurance of the State of California, authorizing him to practice medicine and surgery in this State. At all times

mentioned herein respondent was licensed and his certificate is now in full force and effect.

III

On or about April 28, 1975 respondent and one Donald Burke agreed to submit inaccurate claims for X-rays to the Medi-Cal program. Donald Burke performed the X-rays on the following patients without meeting the requirements of the California Medical Assistance Program. On each of the patients listed below Donald Burke performed an X-ray in Bakersfield, California, prepared a request for either Medi-Cal or Medicare payment, delivered the billing forms to respondent in Mojave. Respondent then falsely certified in effect that he "took the X-rays at his office" in Mojave and signed the Medi-Cal form as the provider of the services in question and falsely described the services as having been performed by him while certifying that the information was true, accurate, complete and that he understood that any false claims, statements or documents or concealment of a material fact contained therein may be prosecuted under applicable federal or state laws. On the Medi-Cal/Medicare cross-over claims respondent falsely certified that the physician's services were personally rendered by him or under his personal direction. Respondent filed inaccurate claims on the following patients:

1. Recipient, G. [REDACTED] G. [REDACTED], ID 1530-0078886-050.

The Medi-Cal claim submitted April 28, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

2. Recipient, J. [REDACTED], J. [REDACTED], ID 1530-0078966-050.

The Medi-Cal claim submitted on July 29, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

3. Recipient, M. [REDACTED] M. [REDACTED], ID 1560-9-56040067. The Medi-Cal claim submitted on July 29, 1975 in the amount of \$100.00 was for an x-ray for the above recipient.

4. Recipient, F. [REDACTED] R. [REDACTED], ID 1584-0129370-080.

The Medi-Cal claim submitted on July 29, 1975 in the amount of \$100.00 was for an x-ray for the above recipient.

5. Recipient, C [REDACTED] C [REDACTED], ID 1530-0058127-005.

The Medi-Cal claim submitted on July 31, 1975 in the amount of \$100.00 was for an x-ray for the above recipient.

6. Recipient, B [REDACTED] S [REDACTED], ID 1537-0024991-001.

The Medi-Cal claim submitted on August 5, 1975 in the amount of \$67.00 was for an x-ray for the above recipient.

7. Recipient, N [REDACTED] S [REDACTED], ID 1530-0060538-050.

The Medi-Cal claim submitted on August 5, 1975 in the amount of \$65.00 was for an x-ray for the above recipient.

8. Recipient, G [REDACTED] W [REDACTED], ID 1510-90562366733.

The Medi-Cal/Medicare crossover claim submitted on April 16, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

9. Recipient, G [REDACTED] M [REDACTED], ID 1510-9-568093316.

The Medi-Cal/Medicare crossover claim submitted on April 17, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

10. Recipient, H [REDACTED] G [REDACTED], ID 1560-9-572506441.

The Medi-Cal/Medicare crossover claim submitted on April 17, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

11. Recipient, C [REDACTED] S [REDACTED], ID 1514-0082180-080.

The Medi-Cal/Medicare crossover claim submitted on April 28, 1975 in the amount of \$120.00 was for an x-ray for the above recipient.

12. Recipient, C [REDACTED] E [REDACTED], ID 1510-9-450183876. The

Medi-Cal/Medicare crossover claim submitted on April 28, 1975 in the amount of \$154.00 was for an x-ray for the above recipient.

13. Recipient, W [REDACTED] M [REDACTED], ID 1560-9-547344034.

The Medi-Cal/Medicare crossover claim submitted on May 6, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

14. Recipient, C [REDACTED] G [REDACTED], ID 1510-9-463076052.

The Medi-Cal/Medicare crossover claim submitted on May 6, 1975

in the amount of \$80.00 was for an x-ray for the above recipient.

15. Recipient, J [REDACTED] M [REDACTED], ID 1510-9-561212113. The Medi-Cal/Medicare crossover claim submitted on May 12, 1975 in the amount of \$137.00 was for an x-ray for the above recipient.

16. Recipient, M [REDACTED] G. G [REDACTED], ID 1510-9-466382611. The Medi-Cal/Medicare crossover claim submitted on May 13, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

17. Recipient, F [REDACTED] G [REDACTED], ID 1510-9-700125597. The Medi-Cal/Medicare crossover claim submitted on May 18, 1975 in the amount of \$35.00 was for an x-ray for the above recipient.

18. Recipient, E [REDACTED] N [REDACTED], ID 1510-9-466342803. The Medi-Cal/Medicare crossover claim submitted on May 23, 1975 in the amount of \$65.00 was for an x-ray for the above recipient.

19. Recipient, L [REDACTED] W [REDACTED], ID 1560-9-550166858. The Medi-Cal/Medicare crossover claim submitted on May 23, 1975 in the amount of \$60.00 was for an x-ray for the above recipient.

20. Recipient, M [REDACTED] V. M [REDACTED], ID 1510-9-442163584. The Medi-Cal/Medicare crossover claim submitted on June 19, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

21. Recipient, H [REDACTED] W [REDACTED], ID 1510-9-547203279. The Medi-Cal/Medicare crossover claim submitted on June 24, 1975 in the amount of \$112.00 was for an x-ray for the above recipient.

22. Recipient, D [REDACTED] S [REDACTED], ID 1560-9-551449624. The Medi-Cal/Medicare crossover claim submitted on June 24, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.

23. Recipient, F [REDACTED] E [REDACTED], ID 1510-9-568380462.
The Medi-Cal/Medicare crossover claim submitted on July 1, 1975 in the amount of \$124.00 was for an x-ray for the above recipient.
24. Recipient, B [REDACTED] B. B [REDACTED], ID 1560-9-558422681.
The Medi-Cal/Medicare crossover claim submitted on July 8, 1975 in the amount of \$140.00 was for an x-ray for the above recipient.
25. Recipient, M [REDACTED] F [REDACTED], ID 1560-9-554367902.
The Medi-Cal/Medicare crossover claim submitted on July 10, 1975 in the amount of \$65.00 was for an x-ray for the above recipient.
26. Recipient, V [REDACTED] G [REDACTED], ID 1510-9-547905391.
The Medi-Cal/Medicare crossover claim submitted on July 15, 1975 in the amount of \$122.00 was for an x-ray for the above recipient.
27. Recipient, S [REDACTED] J [REDACTED], ID 1510-9-562263510.
The Medi-Cal/Medicare crossover claim submitted on July 15, 1975 in the amount of \$122.00 was for an x-ray for the above recipient.
28. Recipient, A [REDACTED] B [REDACTED], ID 1510-9-471149107.
The Medi-Cal/Medicare crossover claim submitted on July 15, 1975 in the amount of \$140.00 was for an x-ray for the above recipient.
29. Recipient, L [REDACTED] L [REDACTED], ID 1510-9-458122708.
The Medi-Cal/Medicare crossover claim submitted on July 17, 1975 in the amount of \$80.00 was for an x-ray for the above recipient.
30. Recipient, J [REDACTED] M [REDACTED], ID 1560-9-462081940.
The Medi-Cal/Medicare crossover claim submitted on July 22, 1975 in the amount of \$35.00 was for an x-ray for the above recipient.
31. Recipient, F [REDACTED] G [REDACTED], ID 1510-9-549053100.
The Medi-Cal/Medicare crossover claim submitted on July 22,

1975 in the amount of \$65.00 was for an x-ray for the above recipient.

32. Recipient, T [REDACTED] A [REDACTED], ID 1510-9-455185468. The Medi-Cal/Medicare crossover claim submitted on June 30, 1975 in the amount of \$18.00 was for an x-ray for the above recipient.

33. Recipient, O [REDACTED] W [REDACTED], ID 1510-9-563037214. The Medi-Cal/Medicare crossover claim submitted on August 5, 1975 in the amount of \$166.00 was for an x-ray for the above recipient.

34. Recipient, A [REDACTED] H [REDACTED], ID 1510-9-450302249. The Medi-Cal/Medicare crossover claim submitted on July 31, 1975 in the amount of \$100.00 was for an x-ray for the above recipient.

IV

Additional evidence was introduced to prove the following:

A. Respondent Kreidler read all the X-ray prints delivered to his Mojave office by Burke and thereafter redelivered to the patient or his healer by Burke. Respondent saw none of the patients set forth above and consulted with no healer respecting the X-rays.

B. Respondent has a general medical practice in Costa Mesa. He established a practice in Mojave in 1974 because of the need for a physician there and by reason of his personal preference for a rural practice. He spends four one-half days each week in Mojave and the balance of his time is devoted to his Costa Mesa practice.

C. Respondent met Burke in connection with the sale and service of X-ray equipment and the training of respondent's personnel in the operation thereof in Mojave. Respondent entered into the arrangement with Burke set forth above in order that Burke might be economically viable in Bakersfield and in order that he might continue

to assist respondent in the X-ray aspect of his Mojave practice.

D. Burke represented to respondent at the outset that none of the prints submitted for reading by respondent would be of traumatic cases, and respondent relied. Respondent often deferred his readings for some days when pressed for time. On occasion he discussed particular X-ray prints with Burke, answered his questions and offered comments on aberrations.

E. Respondent replied to a subsequent demand from the fiscal intermediary by refunding something over \$1,300.00.

* * * * *

Pursuant to the foregoing findings of fact, the following determination of issues is made:

I

The Board may suspend or revoke a certificate pursuant to the provisions of Section 2360, Business and Professions Code of California. The Board shall take action against the holder of a certificate who is guilty of unprofessional conduct pursuant to the provisions of Section 2361 of said Code.

II

Respondent committed acts of dishonesty and violative of Section 14107, Welfare and Institutions Code of California, defined as unprofessional conduct by Section 2361(e), Business and Professions Code of California.

III

Respondent knowingly signed documents related to the practice of medicine which falsely represented the existence of a state of facts, defined as unprofessional conduct by Section 2411, Business and Professions Code of California.

* * * * *

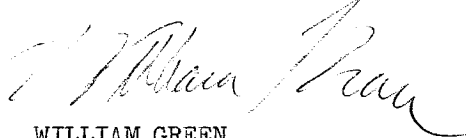
WHEREFORE, THE FOLLOWING ORDER is hereby made:

Certificate No. C-24435 of Frank Kreidler, M.D. is suspended for six (6) months; provided that the effectiveness of said suspension is stayed for three (3) years on condition that he

obey and comply with all laws of the United States, the State of California and its political subdivisions, and the rules of the Board of Medical Quality Assurance.

If he shall comply with the condition during the term of the stay, then the stay shall become permanent. If he shall not comply during the period provided, after notice to him and an opportunity to be heard, the Board may set aside the stay and order the suspension to become effective and make such other disciplinary order which may be just and necessary.

I hereby submit the foregoing which constitutes my Proposed Decision in the above-entitled matter, as a result of the hearing had before me on August 24, 1976, at Santa Ana, California, and recommend its adoption as the decision of the Board of Medical Quality Assurance.



WILLIAM GREEN
Administrative Law Judge
Office of Administrative Hearings

DATED: September 21, 1976
WG:mh

EVELLE J. YOUNGER, Attorney General
of the State of California
JOEL S. PRIMES,
Deputy Attorney General
555 Capitol Mall, Suite 550
Sacramento, California 95814
Telephone: (916) 445-5312

Attorneys for Complainant

BEFORE THE
BOARD OF MEDICAL QUALITY ASSURANCE
DIVISION OF MEDICAL QUALITY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation
Against:

FRANK KREITLER, M.D.
2041 Belshaw
Mojave, California
License No. C-24435

Respondent.

No. *D-1754*

ACCUSATION

COMES NOW THE COMPLAINANT, RAYMOND REID, and for
cause for disciplinary action against the above-named
respondent, FRANK KREITLER, M.D., charges and alleges as
follows:

I

Complainant, Raymond Reid, is the Executive Secretary
of the Board of Medical Quality Assurance, Division of
Medical Quality in the State of California, and makes this
Accusation in such official capacity and not otherwise.

II

On September 17, 1962, respondent, Frank Kreidler,
M.D., was issued Physicians and Surgeons Certificate No.
C-24435 by the Board of Medical Quality Assurance of the
State of California authorizing him to practice medicine and

1 surgery in this State; at all times mentioned herein respondent
2 was licensed by said Board and his certificate is now in full
3 force and effect.

4 III

5 Section 2360 of the Business and Professions Code
6 (hereinafter referred to as "Code") provides, in pertinent
7 part, that every certificate issued by the Board may be
8 suspended or revoked.

9 IV

10 Section 2361(e) of the Code provides that the com-
11 mission of any act involving moral turpitude, dishonesty, or
12 corruption, whether the act is committed in the course of the
13 individual's activities as a certificate holder, or otherwise,
14 or whether the act is a felony or a misdemeanor constitutes
15 unprofessional conduct.

16 V

17 Section 2411 of the Code provides that the knowingly
18 making or signing any certificate or other document directly
19 or indirectly related to the practice of medicine or podiatry
20 which falsely represents the existence or non-existence of a
21 state of facts, constitutes unprofessional conduct.

22 VI

23 Welfare and Institutions Code section 14107 provides
24 that any person who, with intent to defraud, presents for
25 allowance or payment any false or fraudulent claim for furnishing
26 services or merchandise, knowingly submits false information
27 for the purpose of obtaining greater compensation than that to
28 which he is legally entitled for furnishing services or
29 merchandise, or knowingly submits false information for the
30 purpose of obtaining authorization for furnishing services or
31 merchandise under this chapter is punishable by imprisonment in

1 the county jail not longer than one year or in the state prison
2 not exceeding five years, or by fine not exceeding five thousand
3 dollars (\$5,000), or by both such fine and imprisonment.

4 The enforcement remedies provided under this section
5 are not exclusive and shall not preclude the use of any other
6 criminal or civil remedy.

7 VII

8 Respondent, Frank Kreitler, M.D., has been guilty
9 of unprofessional conduct as defined by the provisions of
10 sections 2360, 2361(e) and 2411 of the Code in that he has
11 fraudulently billed the Medi-Cal Program by billing for x-rays
12 performed by another and has thereby billed for medical
13 services not personally rendered as is more specifically
14 set forth below:

15 On or about April 28, 1975, respondent, Frank
16 Kreitler, M.D., and Donald Burke, agreed to defraud the Medi-
17 Cal Program by submitting fraudulent claims for x-rays.
18 Donald Burke performed the x-rays on the following patients
19 without meeting the requirements of the California Medical
20 Assistance Program. On each of the patients listed below
21 Donald Burke performed an x-ray in Bakersfield, California,
22 prepared a request for either Medi-Cal or Medicare payment,
23 delivered the billing forms to respondent, Frank Kreitler,
24 M.D., in Mojave. Respondent, Frank Kreitler, M.D., then
25 falsely certified that he "took the x-rays at his office" in
26 Mojave and signed the Medi-Cal form as the provider of the
27 services in question and falsely described the services as
28 having been performed by him while certifying that the infor-
29 mation was true, accurate, complete and that he understood
30 that any false claims, statements, or documents or conceal-
31 ment of a material fact contained therein may be prosecuted

1 under applicable federal or state laws. On the Medi-Cal/
2 Medicare crossover claim, respondent, Frank Kreidler, M.D.,
3 falsely certified that the physician's services were personally
4 rendered by him or under his personal direction. Respondent
5 filed fraudulent claims on the following patients:

6 1. Recipient, C [REDACTED] G [REDACTED], ID 1530-
7 0078886-050. The Medi-Cal claim submitted April
8 28, 1975 in the amount of \$80.00 was for an x-ray
9 for the above recipient.

10 2. Recipient, J [REDACTED] J [REDACTED], ID 1530-0078966-
11 050. The Medi-Cal claim submitted on July 29,
12 1975 in the amount of \$80.00 was for an x-ray for
13 the above recipient.

14 3. Recipient, M [REDACTED] M [REDACTED], ID 1560-9-
15 560460067. The Medi-Cal claim submitted on July
16 29, 1975 in the amount of \$100.00 was for an x-ray
17 for the above recipient.

18 4. Recipient, F [REDACTED] R [REDACTED], ID 1584-
19 0129370-080. The Medi-Cal claim submitted on July
20 29, 1975 in the amount of \$80.00 was for an x-ray
21 for the above recipient.

22 5. Recipient, C [REDACTED] C [REDACTED], ID 1530-0058127-
23 005. The Medi-Cal claim submitted on July 31, 1975
24 in the amount of \$100.00 was for an x-ray for the
25 above recipient.

26 6. Recipient, B [REDACTED] S [REDACTED], ID 1537-0024991-
27 001. The Medi-Cal claim submitted on August 5, 1975
28 in the amount of \$67.00 was for an x-ray for the
29 above recipient.

30 7. Recipient, N [REDACTED] S [REDACTED], ID 1530-0060538-
31 050. The Medi-Cal claim submitted on August 5, 1975

1 in the amount of \$65.00 was for an x-ray for the
2 above recipient.

3 8. Recipient, G [REDACTED] W [REDACTED], ID 1510-9-
4 562366733. The Medi-Cal/Medicare crossover claim
5 submitted on April 16, 1975 in the amount of \$80.00
6 was for an x-ray for the above recipient.

7 9. Recipient, G [REDACTED] M [REDACTED], ID 1510-9-
8 568093316. The Medi-Cal/Medicare crossover claim
9 submitted on April 17, 1975 in the amount of \$80.00
10 was for an x-ray for the above recipient.

11 10. Recipient, H [REDACTED] G [REDACTED], ID 1560-9-
12 572506441. The Medi-Cal/Medicare crossover claim
13 submitted on April 17, 1975 in the amount of \$80.00
14 was for an x-ray for the above recipient.

15 11. Recipient, C [REDACTED] S [REDACTED], ID 1514-
16 0082180-030. The Medi-Cal/Medicare crossover claim
17 submitted on April 28, 1975 in the amount of \$120.00
18 was for an x-ray for the above recipient.

19 12. Recipient, C [REDACTED] E [REDACTED], ID 1510-9-450183876.
20 The Medi-Cal/Medicare crossover claim submitted on
21 April 28, 1975 in the amount of \$154.00 was for an
22 x-ray for the above recipient.

23 13. Recipient, W [REDACTED] M [REDACTED], ID 1560-9-
24 547344034. The Medi-Cal/Medicare crossover claim
25 submitted on May 6, 1975 in the amount of \$80.00
26 was for an x-ray for the above recipient.

27 14. Recipient, C [REDACTED] G [REDACTED], ID 1510-
28 9-463076052. The Medi-Cal/Medicare crossover claim
29 submitted on May 6, 1975 in the amount of \$80.00
30 was for an x-ray for the above recipient.

31 15. Recipient, J [REDACTED] M [REDACTED], ID 1510-9-

1 561212113. The Medi-Cal/Medicare crossover claim
2 submitted on May 12, 1975 in the amount of \$137.00
3 was for an x-ray for the above recipient.

4 16. Recipient, M [REDACTED] G. G [REDACTED], ID 1510-9-
5 466382611. The Medi-Cal/Medicare crossover claim
6 submitted on May 13, 1975 in the amount of \$80.00
7 was for an x-ray for the above recipient.

8 17. Recipient, F [REDACTED] G [REDACTED], ID 1510-9-
9 700125597. The Medi-Cal/Medicare crossover claim
10 submitted on May 18, 1975 in the amount of \$35.00
11 was for an x-ray for the above recipient.

12 18. Recipient, E [REDACTED] N [REDACTED], ID 1510-9-466342803.
13 The Medi-Cal/Medicare crossover claim submitted on
14 May 23, 1975 in the amount of \$65.00 was for an
15 x-ray for the above recipient.

16 19. Recipient, L [REDACTED] W [REDACTED], ID 1560-9-
17 550166853. The Medi-Cal/Medicare crossover claim
18 submitted on May 23, 1975 in the amount of \$60.00
19 was for an x-ray for the above recipient.

20 20. Recipient, M [REDACTED] V. M [REDACTED], ID 1510-
21 9-442163584. The Medi-Cal/Medicare crossover claim
22 submitted on June 19, 1975 in the amount of \$80.00
23 was for an x-ray for the above recipient.

24 21. Recipient, H [REDACTED] W [REDACTED], ID 1510-9-
25 547203279. The Medi-Cal/Medicare crossover claim
26 submitted on June 24, 1975 in the amount of \$112.00
27 was for an x-ray for the above recipient.

28 22. Recipient, D [REDACTED] S [REDACTED], ID 1560-9-
29 551449624. The Medi-Cal/Medicare crossover claim
30 submitted on June 24, 1975 in the amount of \$80.00
31 was for an x-ray for the above recipient.

1 23. Recipient, F█████ E█████, ID 1510-9-
2 568380462. The Medi-Cal/Medicare crossover claim
3 submitted on July 1, 1975 in the amount of \$124.00
4 was for an x-ray for the above recipient.

5 24. Recipient, B█████ B. B█████, ID 1560-9-
6 558422681. The Medi-Cal/Medicare crossover claim
7 submitted on July 8, 1975 in the amount of \$140.00
8 was for an x-ray for the above recipient.

9 25. Recipient, M█████ F█████, ID 1560-9-
10 554367902. The Medi-Cal/Medicare crossover claim
11 submitted on July 10, 1975 in the amount of \$65.00
12 was for an x-ray for the above recipient.

13 26. Recipient, V█████ G█████, ID 1510-9-
14 547905391. The Medi-Cal/Medicare crossover claim
15 submitted on July 10, 1975 in the amount of \$112.00
16 was for an x-ray for the above recipient.

17 27. Recipient, S█████ J█████, ID 1510-9-
18 562263510. The Medi-Cal/Medicare crossover claim
19 submitted on July 15, 1975 in the amount of \$122.00
20 was for an x-ray for the above recipient.

21 28. Recipient, A█████ B█████, ID 1510-9-
22 471149107. The Medi-Cal/Medicare crossover claim
23 submitted on July 15, 1975 in the amount of \$140.00
24 was for an x-ray for the above recipient.

25 29. Recipient, L█████ L█████, ID 1510-
26 9-458122703. The Medi-Cal/Medicare crossover
27 claim submitted on July 17, 1975 in the amount of
28 \$80.00 was for an x-ray for the above recipient.

29 30. Recipient, J█████ M█████, ID 1560-9-
30 462081940. The Medi-Cal/Medicare crossover claim
31 submitted on July 22, 1975 in the amount of \$35.00

1 was for an x-ray for the above recipient.

2 31. Recipient, F [REDACTED] G [REDACTED], ID 1510-9-
3 549053100. The Medi-Cal/Medicare crossover claim
4 submitted on July 22, 1975 in the amount of \$65.00
5 was for an x-ray for the above recipient.

6 32. Recipient, T [REDACTED] A [REDACTED], ID 1510-9-
7 455185468. The Medi-Cal/Medicare crossover claim
8 submitted on June 30, 1975 in the amount of \$18.00
9 was for an x-ray for the above recipient.

10 33. Recipient, C [REDACTED] W [REDACTED], ID 1510-9-
11 563037214. The Medi-Cal/Medicare crossover claim
12 submitted on August 5, 1975 in the amount of \$166.00
13 was for an x-ray for the above recipient.

14 34. Recipient, A [REDACTED] H [REDACTED], ID 1510-9-
15 450302249. The Medi-Cal/Medicare crossover claim
16 submitted on July 31, 1975 in the amount of \$100.00
17 was for an x-ray for the above recipient.

18 WHEREFORE, complainant prays that the Board of
19 Medical Quality Assurance in the State of California, hold
20 a hearing, and upon proof of any or all charges as contained
21 herein take disciplinary action and separately or severally
22 revoke or suspend the certificate heretofore issued to
23 respondent Frank Kreitler, M.D., to practice medicine and
24 surgery in the State of California, and for such further
25 action as the Board deems proper.

26 DATED: 4/7/76

27
28 [REDACTED]

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31
RAYMOND REID
Executive Secretary
Board of Medical Quality Assurance